

Name in Full

Certificate of Death

Hellen Abbott

Died at ^{Town} *Harre de Grace* ^{County} *Towford* MARYLAND

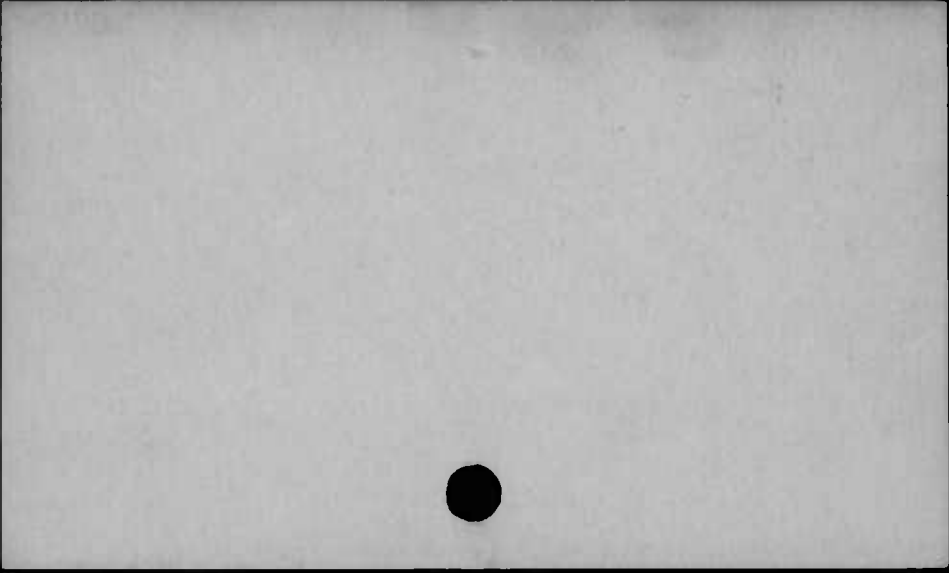
Date 189 *8* ^{Month} *July* ^{Day} *11* ^{Y.} *7* ^{M.} *7* ^{D.} *7* ^{Native of} *Maryland* ^{Occupation} *—*

~~Male~~ *White* ~~Marrried~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ *Single* ~~Widower~~ ~~Number of children living~~

Husband
of
Wife

Father's Name *Amos Abbott* ¹¹⁴ ¹⁵ ¹⁶ ¹⁷ ¹⁸ ¹⁹ ²⁰ ²¹ ²² ²³ ²⁴ ²⁵ ²⁶ ²⁷ ²⁸ ²⁹ ³⁰ ³¹ ³² ³³ ³⁴ ³⁵ ³⁶ ³⁷ ³⁸ ³⁹ ⁴⁰ ⁴¹ ⁴² ⁴³ ⁴⁴ ⁴⁵ ⁴⁶ ⁴⁷ ⁴⁸ ⁴⁹ ⁵⁰ ⁵¹ ⁵² ⁵³ ⁵⁴ ⁵⁵ ⁵⁶ ⁵⁷ ⁵⁸ ⁵⁹ ⁶⁰ ⁶¹ ⁶² ⁶³ ⁶⁴ ⁶⁵ ⁶⁶ ⁶⁷ ⁶⁸ ⁶⁹ ⁷⁰ ⁷¹ ⁷² ⁷³ ⁷⁴ ⁷⁵ ⁷⁶ ⁷⁷ ⁷⁸ ⁷⁹ ⁸⁰ ⁸¹ ⁸² ⁸³ ⁸⁴ ⁸⁵ ⁸⁶ ⁸⁷ ⁸⁸ ⁸⁹ ⁹⁰ ⁹¹ ⁹² ⁹³ ⁹⁴ ⁹⁵ ⁹⁶ ⁹⁷ ⁹⁸ ⁹⁹ ¹⁰⁰ ¹⁰¹ ¹⁰² ¹⁰³ ¹⁰⁴ ¹⁰⁵ ¹⁰⁶ ¹⁰⁷ ¹⁰⁸ ¹⁰⁹ ¹¹⁰ ¹¹¹ ¹¹² ¹¹³ ¹¹⁴ ¹¹⁵ ¹¹⁶ ¹¹⁷ ¹¹⁸ ¹¹⁹ ¹²⁰ ¹²¹ ¹²² ¹²³ ¹²⁴ ¹²⁵ ¹²⁶ ¹²⁷ ¹²⁸ ¹²⁹ ¹³⁰ ¹³¹ ¹³² ¹³³ ¹³⁴ ¹³⁵ ¹³⁶ ¹³⁷ ¹³⁸ ¹³⁹ ¹⁴⁰ ¹⁴¹ ¹⁴² ¹⁴³ ¹⁴⁴ ¹⁴⁵ ¹⁴⁶ ¹⁴⁷ ¹⁴⁸ ¹⁴⁹ ¹⁵⁰ ¹⁵¹ ¹⁵² ¹⁵³ ¹⁵⁴ ¹⁵⁵ ¹⁵⁶ ¹⁵⁷ ¹⁵⁸ ¹⁵⁹ ¹⁶⁰ ¹⁶¹ ¹⁶² ¹⁶³ ¹⁶⁴ ¹⁶⁵ ¹⁶⁶ ¹⁶⁷ ¹⁶⁸ ¹⁶⁹ ¹⁷⁰ ¹⁷¹ ¹⁷² ¹⁷³ ¹⁷⁴ ¹⁷⁵ ¹⁷⁶ ¹⁷⁷ ¹⁷⁸ ¹⁷⁹ ¹⁸⁰ ¹⁸¹ ¹⁸² ¹⁸³ ¹⁸⁴ ¹⁸⁵ ¹⁸⁶ ¹⁸⁷ ¹⁸⁸ ¹⁸⁹ ¹⁹⁰ ¹⁹¹ ¹⁹² ¹⁹³ ¹⁹⁴ ¹⁹⁵ ¹⁹⁶ ¹⁹⁷ ¹⁹⁸ ¹⁹⁹ ²⁰⁰ ²⁰¹ ²⁰² ²⁰³ ²⁰⁴ ²⁰⁵ ²⁰⁶ ²⁰⁷ ²⁰⁸ ²⁰⁹ ²¹⁰ ²¹¹ ²¹² ²¹³ ²¹⁴ ²¹⁵ ²¹⁶ ²¹⁷ ²¹⁸ ²¹⁹ ²²⁰ ²²¹ ²²² ²²³ ²²⁴ ²²⁵ ²²⁶ ²²⁷ ²²⁸ ²²⁹ ²³⁰ ²³¹ ²³² ²³³ ²³⁴ ²³⁵ ²³⁶ ²³⁷ ²³⁸ ²³⁹ ²⁴⁰ ²⁴¹ ²⁴² ²⁴³ ²⁴⁴ ²⁴⁵ ²⁴⁶ ²⁴⁷ ²⁴⁸ ²⁴⁹ ²⁵⁰ ²⁵¹ ²⁵² ²⁵³ ²⁵⁴ ²⁵⁵ ²⁵⁶ ²⁵⁷ ²⁵⁸ ²⁵⁹ ²⁶⁰ ²⁶¹ ²⁶² ²⁶³ ²⁶⁴ ²⁶⁵ ²⁶⁶ ²⁶⁷ ²⁶⁸ ²⁶⁹ ²⁷⁰ ²⁷¹ ²⁷² ²⁷³ ²⁷⁴ ²⁷⁵ ²⁷⁶ ²⁷⁷ 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Jesse Burkhardt

Town

County

MARYLAND

Died at

Belair

Harford

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

8

7

17

Age

65

Penns.

Farmer

Male ☒White ☒Married ☐Widow ☐Divorced ☐

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Unknown

Mother's

Name

Unknown

How long sick

Cause of

Primary

Paralysis

44

16 months

Death

Immediate

" " "

Accident, Suicide, Homicide

Reported by

Silas

Scarboro, M.D.

Address

Belair

Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Joe. Demoss

Town

County

Died at

Emmorton Harford

MARYLAND

Date 189

8

Month

Day

Y.

M.

D.

Native of

Occupation

July 8

Age 84

Harford Md. Farmer

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Mother's

Name

Name

Cause of

Primary

Always General Debility 2 yrs

How long sick

Death

Immediate

153

Accident, Suicide, Homicide

Reported by

J.C. Butler

Address

Bilair

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968



Henry Hanes

Town

County

MARYLAND

Died at

Belair

Harford

Date 189

8

Month

7

Day

2

Y.

M.

D.

Age

45

Native of

Penn.

Occupation

none

Male

X

White

X

Married

0

Widow

0

Divorced

0

~~Female~~~~Colored~~

Single

~~Widower~~

Number of children living

none

Husband

of

Wife

Father's

Name

unknown

Mother's

Name

Unknown

Cause of

Primary

Indigestion

81

How long sick

2 months

Death

Immediate

" "

Accident, Suicide, Homicide

Reported by

Silas Seabrook M.D.

Address

Belair Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Nathaniel J. Hollingsworth

Town

County

Died at

Wheel PA

Harford

MARYLAND

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

8

July 22

Age

64 5-19

Wheel

Miller Farmer

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

1

Husband

of

Hannah J. Carter

Wife

Father's

Name

Ely Hollingsworth

Mother's

Name

Edith Carter

Cause of

Primary

Apoplexy 42

How long sick

2 days

Death

Immediate

Accident, Suicide, Homicide

Reported by

C. J. Hollingsworth

Address

Bel Air

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 25968



Robert A. Stollingsworth

Town

County

Died at Wilkes

Harford Co

MARYLAND

Date 189 8 July 18 10.26 Maryland —

Male White Married Widow Divorced

Female Colored Single Widower Number of children living

Husband
of
Wife

Father's Name Robert A

Mother's Name Elizabeth Adkinson

Cause of Death { Primary Edentition 49 How long sick 10 days

Death { Immediate Convulsion Accident, Suicide, Homicide

Reported by Stollingsworth

Address Blue Air Rd Harford Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Eunice. Morrison

Town

County

Died at

MARYLAND

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

8 7 4 71 11 29 Emmorton Farmer
 Male White Married Widow ~~Divorced~~
 Female Colored Single Widower Number of children living None

Husband
 of
 Wife

Father's

Mother's

Name

Name

Cause of

Primary

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Annice B. Pierce

Town

County

MARYLAND

Died at

Belair

Harford

Date 189

8

Month

7

Day

3

Y.

M.

D.

Age

85

Native of

M. D.

Occupation

unknown

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living *unknown*

Husband

of

Wife

Father's

Name

unknown

Mother's

Name

unknown

Cause of

Primary

old age

141

How long sick

Death

Immediate

"

"

Accident, Suicide, Homicide

Reported by

Silas

Scarboro, M.D.

Address

Belair

Md

